January 17, 2018

Dear Majority Leader McConnell, Speaker Ryan, Minority Leader Schumer, and Minority Leader Pelosi:

As you move to pass another short-term continuing resolution (CR) this week, the Children’s Defense Fund urges you to address the urgent needs of our nation’s children. To meet these needs, the CR must include: a long-term extension of funding for the Children’s Health Insurance Program (CHIP) to ensure stability for the health coverage of nine million children and pregnant women; home visiting support for infants and toddlers and other young children through the Maternal and Infant Early Childhood Home Visiting Program (MIECHV); support for Dreamers and future Dreamers, young people who came here as children and face risk of deportation; desperately needed help for children and other hurricane victims in Florida, Texas, Puerto Rico and the Virgin Islands; and funding for community health centers. All will provide critical support for children and youths, and all have bipartisan support. Action on all of these funding needs to help children and youths are overdue and we urge Congress to act on them with urgency this week.

CDF appreciates that the CR released by the House includes a six-year extension of funding for CHIP, but we urge Congress to seize the unique opportunity presented by the Congressional Budget Office’s score to extend CHIP funding for a total of ten years which would simultaneously help children and cut the federal budget deficit by $6 billion. Funding for CHIP is now 109 days overdue and additional patches, such as those in previous CRs, will not protect the 8.9 million children who benefit from CHIP’s high-quality, child-appropriate affordable health coverage. CHIP continues to have bipartisan support, but partisan politicking jeopardizes the health of these children.

While the CR finally takes the critically important step forward to ensure long-term stability for CHIP, it should also include action on:
The Maternal and Infant Early Childhood Home Visiting Program (MIECHV): Pregnant women and children under five benefit from MIECHV in every state and territory. MIECHV-funded programs use evidence-based voluntary home visiting models to help improve maternal and newborn health, reductions in child abuse and neglect, improved school readiness and achievement, reduction in crime and domestic violence, improved family economic self-sufficiency and referral for community resources. MIECHV must be reauthorized for five years at least at its current funding level of $400 million.

Dreamers and the Deferred Action for Childhood Arrivals (DACA) Program: Dreamers and future Dreamers, young undocumented immigrants brought to this country as children who have passed background checks, gone to school, met other requirements and contribute to their communities every day though work, studies and service also enjoy strong bipartisan support and agreement that they should not be deported. Nearly 800,000 immigrants were granted protection from deportation under DACA, which President Trump has set to end in March. Every day that Congress fails to act before March 5, an average of 122 additional DACA recipients will lose protections and beginning March 5th, 1,000 Dreamers will lose protection every day. The DACA protections must be preserved.

Emergency Relief for Children, Families and Others Struggling from Hurricane Destruction: Children in Florida, Texas, Puerto Rico and the Virgin Islands are still suffering from the effects of devastating hurricanes. Children’s health and education are at great risk, especially in Puerto Rico and the Virgin Islands. Many are struggling and surviving without electricity and water and many schools remain closed. Additional emergency funding is long overdue!

Other critical health programs for children and families, including community health centers: Like CHIP, community health centers funding expired on September 30, 2017, opening the door to crippling service interruptions for patients and confusion in health systems across the U.S. One in 10 children use these centers for care. The U.S. Department of Health and Human Services has projected that loss of funding will result in the closure of 2,800 health centers, the elimination of more than 50,000 jobs, and loss of access to care for more than 9 million patients.

CDF very much appreciates the inclusion in the House version of the CR the long-term extension of CHIP, but believes the bill falls short of providing the crucial help children and other vulnerable populations need. Many children and families’ futures and well-being are at risk without action on MIECHV, DACA, disaster relief, and community health centers. We owe it to our nation’s children and families.

Thank you for your leadership.

Sincerely yours,

Marian Wright Edelman